



**BLACK LOWE & GRAHAM<sup>PLLC</sup>**  
*Intellectual Property Attorneys*

701 Fifth Avenue, Suite 4800  
 Seattle, Washington 98104  
 206.381.3300 • F: 206.381.3301  
 blacklaw.com

**FACSIMILE COVER SHEET**

RECEIVED

CENTRAL FAX CENTER

FAX TO: Patent Office – Office of Initial Examination Department

SEP 28 2004

FACSIMILE NO: 703-872-9306

SUBJECT: CHANGE OF CORRESPONDENCE ADDRESS FOR VARIOUS APPLICATIONS

OUR REFERENCE: PLEASE SEE TRANSMITTALS FOR CORRESPONDING APPLICATION NOS.

FROM: Wendy Saxby for Dale C. Barr

DATE: September 28, 2004

MESSAGE: Please see the attached. Thank you!

The following change of correspondence address forms are enclosed:

10/675,827	BOEI-1-1228
10/329,316	BOEI-1-1097
10/608,640	BOEI-1-1185
10/397,643	BOEI-1-1156
10/376,907	BOEI-1-1157
60/449,967	BOEI-1-1158
60/448/938	BOEI-1-1161
10/452,039	BOEI-1-1165
10/461,037	BOEI-1-1169
10/460,457	BOEI-1-1170
10/427,006	BOEI-1-1171
10/650,232	BOEI-1-1172
10/356,224	BOEI-1-1113
10/334,480	BOEI-1-1118
60/417,714	BOEI-1-1120
10/302,000	BOEI-1-1121
10/641,334	BOEI-1-1122
10/335,683	BOEI-1-1129
10/366,949	BOEI-1-1132
10/367,404	BOEI-1-1138

The contents of this facsimile are privileged and confidential and intended only for the named recipient. If you received this facsimile in error, please notify us immediately by telephone and either destroy this copy or return it to us by mail.

This facsimile is [41] pages in length, including the cover sheet.

Please call Wendy Saxby at 206.957.2461 immediately if any pages need to be retransmitted.

**BEST AVAILABLE COPY**

Patents  
 Trademarks  
 Copyrights

RECEIVED  
CENTRAL FAX CENTER

SEP 28 2004

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0551-0031.  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCEUnder the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

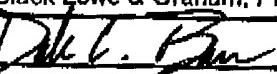
Total Number of Pages in This Submission

Application Number	10/675,827
Filing Date	September 30, 2003
First Named Inventor	Hopkins, Jonathan L.
Art Unit	3644
Examiner Name	Nguyen, Trinh T.
Attorney Docket Number	BOEI-1-1228

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63		
Remarks		

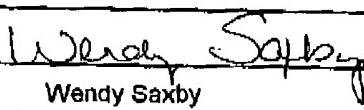
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Black Lowe & Graham, PLLC		
Signature			
Printed name	Dale C. Barr		
Date	September 28, 2004	Reg. No.	40,498

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature



Typed or printed name

Wendy Saxby

Date

9/28/04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Please type a plus sign (+) inside this box → 

PTO/SB/122 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0036  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## CHANGE OF CORRESPONDENCE ADDRESS *Application*

**Address to:**  
Commissioner for Patents  
P.O. BOX 1450  
Alexandria, VA 22313-1450

<b>Application Number</b>	10/675,827
<b>Filing Date</b>	30-Sep-2003
<b>First Named Inventor</b>	Hopkins, Jonathan L.
<b>Group Art Unit</b>	
<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	BOEI-1-1228

Please change the Correspondence Address  
for the above-identified application to:

Customer Number

25315

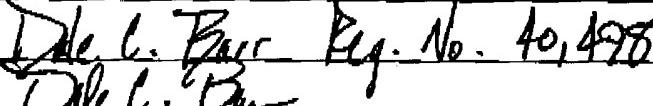
CUSTOMER NUMBER

<input checked="" type="checkbox"/> Firm or Individual Name	Black Lowe & Graham PLLC				
Address	701 Fifth Avenue, Suite 4800				
City	Seattle	State	WA	ZIP	98104
Country	USA				
Telephone	(206) 381-3300	Fax	(206) 381-3301		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number, use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- Applicant/Inventor
- Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration number \_\_\_\_\_.

Typed or Printed Name	Dale C. Barr Reg. No. 40,498
Signature	
Date	April 21, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending on the needs of the individual case. Any comments about the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send to Commissioner for Patents, P.O. BOX 1450, Alexandria, VA 22313-1450.

S:\Clients\B\BOEING\BOEI\1-Patent\boei-coca-merge.doc [01-14-01]

**This Page is Inserted by IFW Indexing and Scanning  
Operations and is not part of the Official Record**

**BEST AVAILABLE IMAGES**

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- BLACK BORDERS**
- IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- FADED TEXT OR DRAWING**
- BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- SKEWED/SLANTED IMAGES**
- COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- GRAY SCALE DOCUMENTS**
- LINES OR MARKS ON ORIGINAL DOCUMENT**
- REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- OTHER:** \_\_\_\_\_

**IMAGES ARE BEST AVAILABLE COPY.**

**As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.**